PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000



or <u>Fax</u>

NSTRUCTO'S: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where a partition of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

26574 7590 01/09/2004 SCHIFF HARDIN, LLP PATENT DEPARTMENT 6600 SEARS TOWER CHICAGO, IL 60606-6473				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
				James D.	Hobart /	(Depositor's name)
				Muse	1) Heron	(Signature)
		<u> </u>		//February	<u>7 5, 2004</u>	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		IVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/937,290 TITLE OF INVENTION: OI	01/02/2002 RGANIC ELECTROLUMI	NESCENT COMP	Andreas Ka		P-01,0300 TTING DIODE	9714
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330)	\$0	\$1330	04/09/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS	ך	
ROY, SIKHA		2879		313-504000	_	
 Change of correspondence address or indication of "Fee Address" (3 CFR 1.363). □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED OF PLEASE NOTE: Unless an assignee is identified below, no assign been previously submitted to the USPTO or is being submitted under the previously submitted to the USPTO or is being submitted under the previously submitted under the previously submitted to the USPTO or is being submitted under the previously submitted to the USPTO or is being submitted under the previously submitted to the USPTO or is being submitted under the previously submitted to the USPTO or is being submitted under the previously submitted to the USPTO or is being submitted to the USPTO or is b			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has separate cover. Completion of this form is NOT a substitute for filing an assignment.			
(A) NAME OF ASSIGNE	EE	(B) RESIDENCE:	(CITY and STATE OR CO		
	am Opto Semi o. OHG	conducto	rs GmbH	Dononahu		
\		-i 6i0 bi			irg, Germany	
Please check the appropriate 4a. The following fee(s) are of		-	. Payment of Fee	· · · · · · · · · · · · · · · · · · ·	corporation or other private g	roup entity government
· · · · · · · · · · · · · · · · · · ·			•	e amount of the fee(s) is en	closed.	
☐ Publication Fee ☐ Payment by credit card. Form PTO-2038 is attached.						
☐ Advance Order - # of O	Copies		The Director Deposit Accoun	is hereby authorized by c t Number	harge the required fee(s), or (enclose an extra	credit any overpayment, to copy of this form).
Director for Patents is reques	ted to apply the Issue Fee a	nd Publication Fee	(if any) or to re-a		issue fee to the application id	
(Authorized Signature) NOTE; The Issue Fee and other than the applicant; a interest as shown by the rec This collection of informat obtain or retain a benefit be application. Confidentiality estimated to take 12 minute completed application form case. Any comments on suggestions for reducing the Patent and Trademark C 22313-1450. DO NOT SI SEND TO: Commissioner 1	Publication Fee (if require registered attorney or agords of the United States Paion is required by 37 CFR by the public which is to find is governed by 35 U.S.C. 1 set to complete, including grate the USPTO Times with	ed) will not be accept; or the assigne tent and Trademarl 1.311. The inform le (and by the US 22 and 37 CFR 1.1 athering, preparing,	te or other party k Office. nation is required PTO to process) 4. This collection and submitting	one 01 FC:1501	AADUFU2 00000026 09	937290 1330.00 OP